Code of Civil Procedure Section 205(c)-(d)

#### Sec. 1. Statutory Authority

This Juror Questionnaire has been drafted under the authority of Code of Civil Procedure section 205(c)-(d) and is intended to expedite jury selection. It is not intended to alter statutes or rules governing the authority of the court or the role of counsel during voir dire.

#### Sec. 2. Use Notes for Courts

#### A. General

This Juror Questionnaire is intended for use in the court's discretion in appropriate civil cases. Its use in cases of brief duration may not be appropriate. Particular kinds of cases may require that this questionnaire be altered or augmented. The Personal Injury Supplement is intended to be used along with the General Questions in personal injury actions. Judges, in their own discretion, must determine what additional kinds of inquiry are appropriate in any given case.

#### B. Pre-Voir Dire Conference

The court should confer with counsel about voir dire before a jury panel is called. At this conference, the court may establish (1) guidelines for the use of the Juror Questionnaire, (2) any supplemental questions to be propounded to the panel by questionnaire, (3) the extent of the court's oral inquiry of the panel, and (4) the extent of oral questioning by counsel. Proposed supplemental questions drafted by counsel should be filed and served at least three court days before the pre–voir dire conference. Arrangements for duplication of completed questionnaires should be confirmed. The parties should share the cost of duplication.

#### C. Introduction of Questionnaire to Prospective Jurors

It is suggested that the Juror Questionnaire be used after the court has given its customary introductory remarks and any additional instructions that the court deems appropriate. The court also may wish to tell the panel members that a questionnaire will be used, to encourage complete answers, and to remind them that their answers will be given under penalty of perjury. In introducing the questionnaire, the court should instruct prospective jurors how to proceed if they have difficulty reading or filling out the form.

The court could direct that the Juror Questionnaire be given to prospective jurors by the jury commissioner in the jury assembly room. However, this procedure ordinarily will mean that jurors are not given complete instructions about the type of case they will hear or the identity of participants and witnesses. In addition, jurors who fill out the form before appearing in the trial court may not clearly understand that their answers are given under penalty of perjury. For these reasons, and to avoid the need to have jurors fill out supplemental questionnaires once they have been sent to the trial court, it is strongly recommended that the Juror Questionnaire be used in the trial court setting.

#### Introduction and Instructions

Thank you for coming to court as a potential juror. Before the case can start, a jury must be selected. The judge and the people involved in the case need to know something about you in order to select jurors who can be fair to both sides.

Everyone has attitudes and opinions that are shaped by their life experiences. Sometimes these experiences can make it difficult to look at a certain issue in an unbiased and unemotional way. As a juror, you must return a verdict based on the law and on the facts proved in court, not on emotion or on other views not supported by the evidence. The judge will give you instructions on the law and on how you should go about deciding the case. You must listen to and follow the judge's instructions.

The questions on this form are designed to help the court and the lawyers learn something about your background and your views on issues that may be related to this case. The questions are asked not to invade your privacy, but to make sure that you can be a fair and impartial juror. If there is any reason why you might not be able to give both sides a fair trial in this case, it is important that you say so.

The judge has decided to use this form to save time and to give you a chance to tell the court and the lawyers about yourself.

In portions of this form, you will see the term "significant personal relationship." That term means a former spouse, domestic partner, life partner, or anyone with whom you have an influential or intimate relationship that you would characterize as important.

If there is anything you do not want to talk about in open court, please circle the question number. After you have finished the questionnaire, let the clerk know that you have circled one or more question numbers.

Do not write on the back of any page. Use an additional sheet of paper.

If you are called to the jury box, your answers to this questionnaire become a matter of public record, just as if you had answered the questions aloud in the courtroom.

If you have trouble reading, understanding, or filling out this form, please let the court clerk know.

PLEASE REMEMBER THAT YOU ARE ANSWERING THESE QUESTIONS UNDER PENALTY OF PERJURY. YOUR ANSWERS MUST BE TRUE AND COMPLETE. THANK YOU FOR YOUR HELP IN SELECTING A FAIR JURY.

### General Questions PLEASE PRINT ALL ANSWERS LEGIBLY

FULL NAME:				
DATE AND PLACE OF BIRTH:				
AREA, NEIGHBORHOOD, OR COMMUNITY IN THIS COUNTY WHERE YOU CURRENTLY LIVE (DO NOT GIVE YOUR ADDRESS):				
HOUSE APARTMENT OWN RENT  AREA, NEIGHBORHOOD, OR COMMUNITY WHERE YOU HAVE LIVED IN THE PAST 10 YEARS (AND DATES):				
WHAT IS THE HIGHEST LEVEL OF EDUC	ATION YOU COMPLETED?			
GRADE SCHOOL OR LESS	SOME COLLEGE			
SOME HIGH SCHOOL	(MAJOR):			
HIGH SCHOOL GRADUATE	COLLEGE GRADUATE (MAJOR):			
OTHER (PLEASE EXPLAIN):	POSTGRADUATE STUDY			
	(MAJOR):			
	TECHNICAL, VOCATIONAL, OR BUSINESS SCHOOL (MAJOR):			
IF YOU PLAN TO ATTEND OR ARE CURR	RENTLY ATTENDING SCHOOL, DESCRIBE:			
-				
IF YOU HAVE TAKEN ANY COURSES OR DESCRIBE:	HAD ANY TRAINING IN MEDICINE OR OTHER HEALTH CARE FIELD,			

' IF _ _	YOU HAVE TAKEN ANY COURSES OR HAD ANY TRAINING IN LAW OR A RELATED SUBJECT, DESCRIBE:
	DUCATIONAL BACKGROUND OF ANY OTHER ADULT WHO LIVES IN YOUR HOME, INCLUDING ANY DEGREES OR ERTIFICATES EARNED:
_ Y	OUR PRESENT EMPLOYMENT STATUS (CHECK ALL THAT APPLY):
	EMPLOYED FULL-TIME RETIRED UNEMPLOYED, LOOKING FOR WORK  EMPLOYED PART-TIME STUDENT UNEMPLOYED, NOT LOOKING FOR WORK  HOMEMAKER
) Y	OUR CURRENT OR MOST RECENT OCCUPATION:
I N	IAME OF YOUR CURRENT OR MOST RECENT EMPLOYER OR, IF A STUDENT, YOUR SCHOOL:
_ 2 V	WHAT ARE YOUR SPECIFIC DUTIES AND RESPONSIBILITIES ON THE JOB?
	OCES YOUR JOB INVOLVE SUPERVISING OTHER PEOPLE? YES NO FYES, APPROXIMATELY HOW MANY?
ιA	.RE YOU INVOLVED IN THE HIRING OR FIRING OF OTHER EMPLOYEES? YES NO
Α	RE YOU INVOLVED IN EVALUATING THE JOB PERFORMANCE OF OTHER EMPLOYEES? YES NO
6 A	LL OTHER EMPLOYMENT YOU HAVE HAD (AND FOR HOW LONG):
_	
	LL FULL-TIME EMPLOYMENT OF YOUR SPOUSE OR ANY PERSON WITH WHOM YOU HAVE A SIGNIFICANT ERSONAL RELATIONSHIP (AND FOR HOW LONG):
_	
	WHAT ARE/WERE THE OCCUPATIONS OF YOUR PARENTS? (IF RETIRED, WHAT DID THEY DO BEFORE?)
F	ATHER:

SEX	AGE	DOES CHILD LIVE WITH YOU?	EDUCATION	T CURRENTLY LIVE WITH YOU):  OCCUPATION
	SHIP HAS EV		TITH WHOM YOU HAVE A SIG Y, PLEASE LIST FOR EACH T	NIFICANT PERSONAL HE BRANCH OF SERVICE AND DATES
I.21 WHAT SOC	CIAL, CIVIC, P	ROFESSIONAL, TRADE, OR (	OTHER ORGANIZATIONS AR	E YOU AFFILIATED WITH?
1.22 DESCRIBE	ANY OFFICE	S YOU HAVE HELD IN ORGA	NIZATIONS LISTED ABOVE:	
I.23 DO YOU KN	NOW ANYON	E ON THIS JURY PANEL?		
WHERE DIE	O YOU SERVE	HAVE YOU SERVED ON A JU		
WHAT KINL	JS OF CASES	DID YOU HEAR WHILE SERV	TING ON A JURY?	
		IN HOW MANY OF TI	HOSE CASES DID THE JURY	REACH A VERDICT?
	IN	HOW MANY OF THOSE CASE	S DID YOU SERVE AS THE J	URY FOREPERSON?
		WAS YOUR JURY SE	ERVICE A POSITIVE OR NEGA	ATIVE EXPERIENCE?
1.25 IF YOU HA	VE EVER BEI	EN TO COURT FOR ANY OTH	ER REASON (EXCLUDING DI	VORCE), EXPLAIN:

	IF YOU PERSONALLY KNOW ANY JUDGES OR ATTORNEYS OR COURT PERSONNEL, WHAT ARE THEIR NAMES AND RELATIONSHIP TO YOU?
	DESCRIBE ANY PROBLEMS (VISION, HEARING, OR OTHER MEDICAL PROBLEMS) THAT MAY AFFECT YOUR JURY SERVICE:
.28	IF YOU OR ANYONE CLOSE TO YOU HAS EVER MADE ANY TYPE OF CLAIM FOR DAMAGES, EXPLAIN:
	IF A CLAIM FOR MONEY DAMAGES HAS EVER BEEN MADE AGAINST YOU OR ANYONE CLOSE TO YOU, EXPLAIN THE CIRCUMSTANCES:
.30	IF YOU OR ANYONE CLOSE TO YOU HAS EVER SUED OR BEEN SUED IN ANY TYPE OF LAWSUIT, EXPLAIN:
32	DO YOU FEEL THAT MONEY DAMAGES AWARDED IN LAWSUITS ARE (CHECK ONE):  EXCESSIVE OCCASIONALLY TOO LOW  OFTEN TOO LARGE OFTEN TOO LOW  ABOUT RIGHT OTHER (SPECIFY):  IF YOU HAVE ANY ETHICAL, RELIGIOUS, POLITICAL, OR OTHER BELIEFS THAT MAY PREVENT YOU FROM SERVING AS A JUROR, EXPLAIN:
	IF THERE IS ANY MATTER NOT COVERED BY THIS QUESTIONNAIRE THAT COULD AFFECT YOUR ABILITY TO BE A FAIR AND IMPARTIAL JUROR, EXPLAIN:

### Personal Injury Supplement

		THE APPROPRIATE LINE(S) IF YOU OR ANYONE CLOSE TO YOU HAS EVER BEEN ITY BY ANY OF THE FOLLOWING TYPES OF BUSINESSES:
YOURSELF	OTHER PERS	SON
		ANY COURT IN THE STATE OF CALIFORNIA
		ATTORNEY, LAW FIRM, OR LAW OFFICE
		CLAIMS ADJUSTMENT, EVALUATION, REVIEW, SETTLEMENT, OR INVESTIGATION
		ACCIDENT INVESTIGATION OR LAW ENFORCEMENT
		DISABILITY, HEALTH, LIFE, CASUALTY, OR ACCIDENTAL INJURY BENEFITS OR PROGRAMS
		ECONOMICS, ACTUARIAL, OR INVESTMENTS
		ECONOMICS, ACTUARIAL, OR INVESTMENTS HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD
		HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY,
		HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  E IN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT
		HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  E IN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT
PERSON TO Y	YOU, THE TYP	HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  E IN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT
DO YOU HAVI	YOU, THE TYP	HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  E IN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT E AND DETAILS OF THAT EMPLOYMENT, AND THE YEARS OF THAT EMPLOYMENT:
DO YOU HAVI	YOU, THE TYPE  E ANY BELIEF  NO	HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  E IN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT E AND DETAILS OF THAT EMPLOYMENT, AND THE YEARS OF THAT EMPLOYMENT:
DO YOU HAVI	YOU, THE TYPE  E ANY BELIEF  NO	HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  E IN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT E AND DETAILS OF THAT EMPLOYMENT, AND THE YEARS OF THAT EMPLOYMENT:
DO YOU HAVI	YOU, THE TYPE  E ANY BELIEF  NO	HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  E IN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT E AND DETAILS OF THAT EMPLOYMENT, AND THE YEARS OF THAT EMPLOYMENT:
DO YOU HAVI	YOU, THE TYPE  E ANY BELIEF  NO	HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  E IN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT E AND DETAILS OF THAT EMPLOYMENT, AND THE YEARS OF THAT EMPLOYMENT:
DO YOU HAVE DO YOU HAVE IF YES, EXPLA DO YOU OR A PRACTITIONE	E ANY BELIEF  NO AIN:  ANY MEMBERS  REGULARL	HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  EIN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT E AND DETAILS OF THAT EMPLOYMENT, AND THE YEARS OF THAT EMPLOYMENT:  S AGAINST AWARDING DAMAGES FOR PERSONAL INJURY, PAIN, OR SUFFERING?
DO YOU HAVE  JES  JES  JES  JES  JES  JES  JES  JE	E ANY BELIEF NO AIN:  ANY MEMBERS ER REGULARL	HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD  EIN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT E AND DETAILS OF THAT EMPLOYMENT, AND THE YEARS OF THAT EMPLOYMENT:  S AGAINST AWARDING DAMAGES FOR PERSONAL INJURY, PAIN, OR SUFFERING?

Verification

I,	., DECLARE UNDER PENALTY OF PERJURY UNDER THI
LAWS OF THE STATE OF CALIFORNIA THAT THE FORE	GOING RESPONSES I HAVE GIVEN ON THIS JUROR
QUESTIONNAIRE, AND ON ANY ATTACHED SHEETS, AF	RE TRUE AND CORRECT TO THE BEST OF MY
KNOWLEDGE AND BELIEF.	
Date:	
<b>L</b>	
(SIGNATURE OF DECLARANT)	
(5.5.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	